

Serum Lipid Differences. The tabulated material of (151) Pozner and Billimoria was subsequently challenged by Howell in a letter to the Editor (Br Med J 22 April 1972).

Smoking and Vascular Disease

Sir,—Your leading article (1 April, p. 3) states unequivocally, "The medical profession is the only professional group in which cigarette smoking has lessened," without the support of any references. I would doubt if each and every professional group has been adequately sampled and reported on. *Smoking and Health Now*¹ reports that after the publication of the 1962 report there was a sharp reduction in the number of men smoking cigarettes, a reduction maintained in social classes I, II, and III. The professional groups fall in these classes.

Your article goes on to point out that Pozner and Billimoria² (in a small selected sample) found that "fasting plasma turbidity, cholesterol, and β and pre- β lipoproteins were significantly increased in heavy smokers," but you failed to make the most important point that in male heavy smokers only pre- β lipoprotein means were significantly higher than those of non-smokers. In a sample of 2433 middle-aged males Howell³ failed to find significant correlation between smoking and haemoglobin, ESR, serum cholesterol, β lipoprotein, and uric acid levels. The one striking finding—namely, a significantly increased white blood cell count in heavy smokers—has now been

confirmed by Corre, Lellouch, and Schwartz.⁴ In some small way this may provide confirmation that the sample used by Howell was not atypical for males of that age group with an average smoking history extending over 20 years.—I am, etc.,

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¹ Royal College of Physicians, *Smoking and Health Now*. London, Pitman, 1971.

² Pozner, H., and Billimoria, J. D., *Lancet*, 1970, 1, 1313.

³ Howell, R. W., *Lancet*, 1970, 2, 152.

⁴ Corre, F., Lellouch, J., and Schwartz, D., *Lancet*, 1971, 2, 632.

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